

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

2012 OCT 16 AM 8:39

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Harrison for Pocahontas County Auditor

IMPORTANT: Indicate by # type of committee you are reporting for 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Ann M. Harrison

Political Party (if applicable)

N/A

Office Sought

Auditor

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm # 19035

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Ann M. Harrison

SIGNATURE OF PERSON FILING REPORT

(712) 335-3850

TELEPHONE

10-13-12

DATE SIGNED

I AM FILING A 10-19-2012 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election

11-6-12

County & Local Committees, enter County in which Election is held

Pocahontas

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

1994.18

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Harrison for Pocahontas County Auditor

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7-22-12	Tim Kelly 270 N. 26th St. Fort Dodge, IA. 50501	friend	Magnetic Auto Signs	\$ 50. ⁰⁰	<input type="checkbox"/>
7-23-12	Ann Harrison 76 Court Sq Pocahontas, IA 50574	Self	LIST	19 ⁵⁰ / ₁₀₀	<input type="checkbox"/>
8-6-12	Ann Harrison 76 Court Sq Pocahontas IA 50574	Self	Signs	140. ⁰⁰	<input type="checkbox"/>
8-8-12	Ann Harrison 76 Court Sq Pocahontas IA 50574	Self	Printing 3500 Brochures	416.36	<input type="checkbox"/>
8-8-12	Ann Harrison 76 Court Sq Pocahontas, IA 50574	Self	Inserts Rec Don/Co Adv 33270.08 Flyers	266.16	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

892.02

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 1 of 1
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

Harrison for Pocahontas County Auditor

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9.27.12	Ann M Harrison 76 Court St Pocahontas, IA 50574	Self	add'l Campaign fees	\$ 325. ¹⁴	<input type="checkbox"/>
9.17.12	" " "	"	Postage to mail some fees	60. ³⁰	<input type="checkbox"/>
10.13.12	" " "	"	Auto Expenses 2312 miles @ .31 per mi	716. ⁷²	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 1102.¹⁶TOTAL (if last
page of this
schedule) \$ 1994.¹⁸

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)